ALCOHOLISM REHABILITATION CENTER REPORT (Use reverse for Remarks)						MONTH AND YEAR				REPORT CONTROL SYMBOL			
SUMMARY	OFFI	CERS	AIRMEN		ACTIVE DUTY OTHER		DEPENDENTS AND AUTH CIVILIANS		RETIRED		TOTAL		GRAND
ADMISSIONS	м	F	м	F	м	F	м	F	м	F	M	F	GF T(
NUMBER IN TREATMENT AT START OF MONTH													
2. NUMBER OF NEW ADMISSIONS FOR THE MONTH FROM FOLLOWING SOURCE:													
A. FIRST ADMISSIONS													
B. REPEAT ADMISSIONS													
TOTAL NEW ADMISSIONS FOR THE MONTH													
3. TOTAL NO. IN TREATMENT AT START OF MONTH AND NEW ADMISSIONS (Item 1 plus 2)													
4. NUMBER EXITING PROGRAM													
5. NUMBER REMAINING AT END OF MONTH (Item 3 minus Item 4)													
6. DIAGNOSIS OF PATIENTS FOR THE MONTH FOR:													
A. ALCOHOL ABUSE (DSM III 305.OX)													
B. ALCOHOL DEPENDENCE (DSM III 303.9X)		, .											
C. OTHER AND UNSPECIFIED ALCOHOLISM													
TOTAL DIAGNOSES (MUST EQUAL GRAND TOTAL IN ITEM 2)													
7. DISPOSITIONS													
A. COMPLETED PROGRAM AND RETURNED TO DUTY OR HOME													
B. COMPLETED PROGRAM AND RECOM- MENDED FOR MEDICAL SEPARATION										÷			
C. FAILED TO COMPLETE PROGRAM AND RETURNED TO DUTY OR HOME													
D. FAILED TO COMPLETE PROGRAM AND RECOMMENDED FOR SEPARATION													
E. OTHER (Specify)					!								
TOTAL DISPOSITIONS (MUST EQUAL TOTAL IN ITEM 4)											·		
TOTAL NUMBER OF PATIENTS SCHEDULED FOR FUTURE ENTRY INTO THE ALCOHOLISM REHABILITATION CENTER PROGRAM AS OF THE END OF THIS REPORTING MONTH											=		
REMARKS													
										·			
TYPED NAME OF PROGRAM DIRECTOR			SIGNAT	URE				••	·	DATE			